



DEPARTMENT OF THE NAVY

BUREAU OF MEDICINE AND SURGERY  
WASHINGTON, D.C. 20372-5120

IN REPLY REFER TO  
BUMEDINST 6300.9  
BUMED-03  
5 Sep 90

BUMED INSTRUCTION 6300.9

From: Chief, Bureau of Medicine and Surgery  
To: Ships and Stations Having Medical Personnel

Subj: FAMILY PLANNING SERVICES

Ref: (a) Title 10, U.S. Code, Chapter 55 (NOTAL)  
(b) SECNAVINST 6300.4  
(c) NAVMEDCOMINST 6320.3B  
(d) Title 5, U.S. Code Section 552a (NOTAL)  
(e) NAVMED P-5020, Resource Management Handbook  
section 24401 (NOTAL)

1. Purpose. To provide Navy Department policy for providing family planning services (contraception and sterilization) in naval medical treatment facilities (MTFs).

2. Policy

a. Family planning services will be provided as an element of military healthcare for active and retired military personnel, their dependents, and eligible survivors per reference (a). Family planning services includes information on reproductive physiology, methods of fertility control, sterilization, counseling in areas of human sexuality and prevention of sexually transmitted infections, and preconceptual counseling.

b. Abortion is not considered a part of family planning services. Navy's abortion policy is reference (b).

3. Family Planning Services

a. Family planning services will be provided in naval MTFs, including facilities onboard naval vessels, subject to the availability of space, facilities, and authorized and qualified staff. When a naval MTF does not have the capability to provide family planning services, the facility is authorized to transfer the patient to another uniformed service MTF where the services are available, or to procure the services from civilian sources per reference (c).

b. Eligible dependents and other beneficiaries not able to be seen at the MTF need to be counseled on the cost-sharing provisions of the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS). The MTF does not cover the cost for family planning services for these patients.



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c. Family planning and counseling services may be provided by authorized medical and nonmedical personnel. Family planning and counseling services may take place where appropriate, including MTFs, chaplains' offices, and onboard ships. Personnel who object to rendering family planning services on moral, ethical, or religious grounds are not required to perform or assist in such procedures unless their refusal poses an immediate threat to the health of a patient.

d. Contraceptive services include counseling on the various contraceptive methods and techniques, prescription of oral contraceptive drugs approved by the Food and Drug Administration, and prescription of other methods of contraception including, but not limited to, mechanical devices, chemical methods, and fertility timing techniques.

e. Surgical Sterilization. For the purpose of this instruction, sterilizations referred to here are limited to elective procedures for family planning purposes and not to sterilizations which may be the secondary result of other medical procedures.

#### 4. Informed Consent

a. Informed consent for family planning services is based upon the general principles of consent for all medical and dental treatment. If competent to make healthcare decisions, the patient alone has the authority to consent. Legal capacity to consent will normally be determined by the law of the State in which the facility is located.

b. To the extent consistent with this instruction, contraceptive services must be provided in conformance with the law of the State in which the facility is located. The patient's privacy must be maintained per reference (d). If in the judgment of the attending physician a patient is not of sufficient maturity or intelligence to understand the associated risks and consequences, contraceptive services may be refused. In those jurisdictions where minors have the legal capacity to consent, they should be strongly encouraged to allow the healthcare provider to notify the patient's parent or sponsor of the family planning services provided.

c. Sterilization of nonemancipated minors or persons of questionable mental capacity may be performed only under a court order issued by a court of competent jurisdiction.

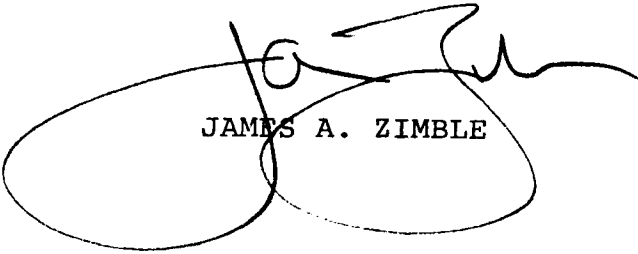
d. Written documentation of the patient's consent must be provided on the Request for Administration of Anesthesia and for Performance of Operations and Other Procedures, SF 522, before any surgical or invasive procedure. The practitioner must describe the

proposed procedure in lay terms along with an explanation of the expected results, the possibilities of failure, and alternatives to the procedure. Written evidence of counseling must be noted in the medical record.

e. Eligibility criteria for all beneficiaries, including members of foreign military services and their dependents, beneficiaries of other Federal services, and other personnel categories is contained in reference (c). The reimbursable rates for all beneficiaries are contained in reference (e) and are updated annually.

5. Responsibility. The Chief, Bureau of Medicine and Surgery is responsible for the Navy's family planning policy.

6. Form. SF 522 (10-76), Request for Administration of Anesthesia and for the Performance of Operations and Other Procedures, NSN 7540-00-634-4165 is available from the Federal Supply System through normal supply procurement procedures.



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